PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

Alexandria, Virginia 22313-1450

or <u>Fax</u>

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

maintenance fee notification	s.	in Block I, by (a)	specifying a r	new correspondence addres	will be mailed to the current s; and/or (b) indicating a sepa	correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 000293 7590 01/19/2005				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
Ralph A. Dowell 2111 Eisenhower A Suite 406 Alexandria, VA 22	314	IPE YES		I hereby certify that states Postal Service	ertificate of Mailing or Transthis Fee(s) Transmittal is bein with sufficient postage for fir all Stop ISSUE FEE address PTO (703) 746-4000, on the control of the control	g deposited with the United st class mail in an envelope
	(MI	AR 1 4 2005 H				(Depositor's name)
						(Signature)
	\V.	LBADENARIE FIL				(Date)
APPLICATION NO.		FII	RST NAMED I		ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/879,987 TITLE OF INVENTION: AI	06/14/2001 PPARATUSES AND METH	ODS FOR SURGIC	Randy E.		13702	5057
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	240 VPK	\$1400	700	\$300	\$1700	04/19/2005
EXAM	EXAMINER AF			CLASS-SUBCLASS	7 9 10000	
CHOOBIN, BARRY		2625	<u>.</u>	382-103000		
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNE	EE	(B) l	RESIDENCE:	(CITY and STATE OR CO	DUNTRY)	
IGO TECHNOLOGIES INC. Kin				ngston,Ontario, Canada K7K 4M1		
Please check the appropriate	assignee category or categori	ies (will not be print	ted on the pate	ent): 🗖 Individual 💂 (Corporation or other private gr	oup entity Government
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):						
Issue Fee A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # of Copies					charge the required fee(s), or(enclose an extra c	credit any overpayment, to
a. Applicant claims SM	(from status indicated above) MALL ENTITY status. See 3	7 CFR 1.27.	b. Applican	DEFICIENCIES Of is no longer claiming SM	NLY LL ENTITY status. See 37 C	FR 1.27(g)(2).
NOTE: The Issue Fee and Puinterest as shown by the reco	is requested to apply the Issue ablication Fee (if required) wards of the United States Pater	Fee and Publication ill not be accepted for and Trademark O	n Fee (if any) rom anyone o ffice.	iner inan the applicant; a re-	sly paid issue fee to the applications of the strength of the	ation identified above. he assignee or other party in 11 69879987
Authorized Signature	1 3 John			Date	3–14–05	
Typed or printed name	Ralph A. Dowe	11		Registratio	2501 26868	700.00 OP
This collection of information an application. Confidentialit submitting the completed appthis form and/or suggestions.	n is required by 37 CFR 1.31 ty is governed by 35 U.S.C. plication form to the USPTC for reducing this burden, sho	1. The information 122 and 37 CFR 1.1 2. Time will vary do build be sent to the C	is required to 14. This collect epending upor thief Informati	obtain or retain a benefit by tion is estimated to are file the individual case. Any cion Officer, U.S. Patent an	the public which is to file (an annual state) to complete, including the same of the trademark office, U.S. Dep	d by the USPTO to process) ng gathering propagating, and me you require to complete artment of Commerce, P.O.

1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.